

UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION

Petition Date: **07/06/107**CASE NAME: **JOHN H. HAMILTON, SR.**CASE NUMBER: **10-35770-H4-11****MONTHLY OPERATING REPORT SUMMARY FOR PERIOD 09/16/10 – 10/26/10**

MONTH	09/26/10 – 10/26/10					
REVENUES (MOR-6)	0.00					
INCOME BEFORE INT, DEPREC./TAX (MOR-6)						
NET INCOME (LOSS) (MOR-6)						
PAYMENTS TO INSIDERS (MOR-9)						
PAYMENTS TO PROFESSIONALS (MOR-9)						
TOTAL DISBURSEMENTS (MOR-8)	0.00					

\*\*\*The **original** of this document **must be filed** with the United States Bankruptcy Court and a **copy must be sent** to the United States Trustee\*\*\*

CIRCLE ONE

<b>REQUIRED INSURANCE MAINTAINED</b>		
<b>AS OF SIGNATURE DATE</b>	<b>EXP.</b>	<b>DATE</b>
CASUALTY	YES(X) NO( )	—- —- —-
LIABILITY	YES( ) NO( )	—- —- —-
VEHICLE	YES( ) NO( )	—- —- —-
WORKER'S	YES( ) NO( )	—- —- —-
OTHER _____	YES( ) NO( )	—- —- —-

  

TRUSTEE NAME: <b>Ronald Sommers</b>
FIRM: <b>Nathan, Sommers Jacobs</b>
ADDRESS: <b>2800 Post Oak Blvd., 61st Floor,</b>
ADDRESS:
CITY, STATE ZIP: <b>Houston, TX 77056-6102</b>
TELEPHONE: <b>7138924801, 7138924800</b>

Are all accounts receivable being collected within terms? **Yes No**Are all post-petition liabilities, including taxes, being paid within terms? **Yes No**Have any pre-petition liabilities been paid? **Yes No** If so, describe \_\_\_\_\_Are all funds received being deposited into DIP bank accounts? **Yes No**Were any assets disposed of outside the normal course of business? **Yes No**

If so, describe \_\_\_\_\_

Are all U. S. Trustee Quarterly Fee Payments current? **Yes No**What is the status of your Plan of Reorganization ? Case was converted to Chapter 7 on 10/26/10

I certify under penalty of perjury that the following complete

Monthly Operating Report (MOR), consisting of MOR-1 through MOR-9 plus attachments, is true and correct.

SIGNED /s/ Ronald J. Sommers, Trustee

Ronald J. Sommers, Trustee

**MOR-1**

Petition Date: 07/06/107

CASE NAME: JOHN H. HAMILTON, SR.

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**COMPARATIVE BALANCE SHEETS**

<b>ASSETS</b>	<b>FILING DATE*</b> <b>07/06/10</b>	<b>09/16/10 –</b> <b>10/26/10</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>
<b>CURRENT ASSETS</b>		0.00					
Cash							
Accounts Receivable, Net							
Inventory: Lower of Cost or Market							
Prepaid Expenses							
Investments							
Other							
<b>TOTAL CURRENT ASSETS</b>		0.00					
PROPERTY, PLANT&EQUIP, @ COST							
Less Accumulated Depreciation							
NET BOOK VALUE OF PP & E							
OTHER ASSETS:							
1. Tax Deposits							
2. Investments in Subs							
3.							
4. (attach list)							
<b>TOTAL ASSETS</b>		0.00					

\*Per Schedules and Statement of Affairs**MOR-2**

Revised:6/14/96

Petition Date: 07/06/107

CASE NAME: JOHN H. HAMILTON, SR.

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**COMPARATIVE BALANCE SHEETS**

<b>LIABILITIES &amp; OWNER'S EQUITY</b>	<b>FILING DATE*</b> <b>07/06/10</b>	<b>09/16/10 –</b> <b>10/26/10</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>
<b>LIABILITIES:</b>							
POST-PETITION LIABILITIES (MOR-4)		0.00					
PRE-PETITION LIABILITIES:							
Notes Payable-Secured							
Priority Debt							
Federal Income Tax							
FICA/Withholding							
Unsecured Debt							
Other							
<b>TOTAL PRE-PETITION LIABILITIES</b>							
<b>TOTAL LIABILITIES</b>		0.00					
<b>OWNERS'S EQUITY (DEFICIT):</b>							
PREFERRED STOCK							
COMMON STOCK							
ADDITIONAL PAID-IN CAPITAL							
RETAINED EARNINGS: Filing Date							
RETAINED EARNINGS: Post Filing Date							
<b>TOTAL OWNER'S EQUITY (NET WORTH)</b>							
<b>TOTAL LIABILITIES &amp; OWNER'S EQUITY</b>		0.00					

**MOR-3***\*Per Schedules and Statement of Affairs*

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CASE NAME: JOHN H. HAMILTON, SR.

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**SCHEDULE OF POST-PETITION LIABILITIES**

	09/16/10 – 10/26/10	MONTH8	MONTH	MONTH	MONTH	MONTH
<b><u>TRADE ACCOUNTS PAYABLE</u></b>						
<b>TAX PAYABLE:</b>						
<b>Federal Payroll Taxes</b>						
<b>State Payroll &amp; Sales</b>						
<b>Ad Valorem Taxes</b>						
<b>Other Taxes</b>						
<b>TOTAL TAXES PAYABLE</b>						
<b>SECURED DEBT POST-PETITION</b>						
<b>ACCRUED INTEREST PAYABLE</b>						
<b>*ACCRUED PROFESSIONAL FEES:</b>						
<b>OTHER ACCRUED LIABILITIES:</b>						
<b>1. ACCRUED PROFESSIONAL EXPENSES:</b>						
<b>2.</b>						
<b>3.</b>						
<b><u>TOTAL POST-PETITION LIABILITIES (MOR-3)</u></b>	0.00					

\* Payment Requires Court Approval.

**MOR-4**

Revised:6/14/96

Petition Date: **07/06/107**

CASE NAME: **JOHN H. HAMILTON, SR.**

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### AGING OF POST-PETITION LIABILITIES

**09/16/10 – 10/26/10**

DAYS	TOTAL	TRADE ACCTS	FED TAXES	STATE TAXES	AD-VALOREM, OTHER TAXES	OTHER
<b>0-30</b>						
<b>31-60</b>						
<b>61-90</b>						
<b>91 +</b>						
<b>TOTAL</b>						

### AGING OF ACCOUNTS RECEIVABLE

MONTH						
<b>0-30 DAYS</b>						
<b>31-60 DAYS</b>						
<b>61-90 DAYS</b>						
<b>91 + DAYS</b>						
<b>TOTAL</b>						

**MOR-5**

*Revised:6/14/96*

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CASE NAME: JOHN H. HAMILTON, SR.

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**STATEMENT OF INCOME (LOSS)**

MONTH	09/16/10 – 10/26/10						FILING TO DATE
REVENUES (MOR-1)	0.00						
TOTAL COST OF REVENUES	0.00						
GROSS PROFIT	0.00						
OPERATING EXPENSES:	0.00						
Selling & Marketing							
General & Administrative							
Insiders Compensation							
Professional Fees							
Other (attach list) Repairs							
TOTAL OPERATING EXPENSES	0.00						
INCOME BEFORE INT, DEPR/TAX (MOR-1)							
INTEREST EXPENSE							
DEPRECIATION							
OTHER (INCOME) EXPENSE*							
OTHER ITEMS** Real Estate Taxes							
TOTAL INT, DEPR & OTHER ITEMS							
NET INCOME BEFORE TAXES	0.00						
FEDERAL INCOME TAXES							
NET INCOME (LOSS) (MOR-1)	0.00						

Accrual Accounting Required, Otherwise Footnote With Explanation

\* Footnote Mandatory

\*\* Unusual and/or infrequent item(s) outside the ordinary course of business; requires footnote

**MOR-6**

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Petition Date: 07/06/107

CASE NAME: JOHN H. HAMILTON, SR.

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CASH RECEIPTS AND DISBURSEMENTS	09/16/10 – 10/26/10	MONTH	MONTH	MONTH	MONTH	MONTH	FILING TO DATE
1. CASH - BEGINNING OF QUARTER	0.00						
RECEIPTS:	0.00						
2. CASH SALES	0.00						
3. COLLECTION OF ACCOUNTS RECEIVABLE	0.00						
4. LOANS & ADVANCES (attach list)	0.00						
5. SALE OF ASSETS	0.00						
6. OTHER (attach list)	0.00						
TOTAL RECEIPTS	0.00						
(Withdrawal)Contribution by Individual Debtor MFR-2*	0.00						
DISBURSEMENTS:	0.00						
7. NET PAYROLL	0.00						
8. PAYROLL TAXES PAID	0.00						
9. SALES, USE & OTHER TAXES PAID – REAL ESTATE	0.00						
10. SECURED / RENTAL / LEASES	0.00						
11. UTILITIES	0.00						
12. INSURANCE	0.00						
13. INVENTORY PURCHASES	0.00						
14. VEHICLE EXPENSES	0.00						
15. TRAVEL & ENTERTAINMENT	0.00						
16. REPAIRS, MAINTENANCE & SUPPLIES	0.00						
17. ADMINISTRATIVE & SELLING	0.00						
18. OTHER (attach list)	0.00						
TOTAL DISBURSEMENTS FROM OPERATIONS	0.00						
19. PROFESSIONAL FEES	0.00						
20. U.S. TRUSTEE FEES	0.00						
21. OTHER REORGANIZATION EXPENSES (attach list)	0.00						
TOTAL DISBURSEMENTS	0.00						
22. NET CASH FLOW	0.00						
23. CASH - END OF MONTH (mor-2)	0.00						

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**CASH ACCOUNT RECONCILIATION**  
**09/16/10 – 10/26/10**

<b>BANK NAME</b>					
<b>ACCOUNT NUMBER</b>		<b>#</b>	<b>#</b>		
<b><u>ACCOUNT TYPE</u></b>	<b><u>OPERATING</u></b>	<b><u>PAYROLL</u></b>	<b><u>TAX</u></b>	<b><u>OTHER FUNDS</u></b>	<b><u>TOTAL</u></b>
<b>BANK BALANCE</b>					
<b>DEPOSIT IN TRANSIT</b>					
<b>OUTSTANDING CHECKS</b>					
<b>ADJUSTED BANK BALANCE</b>					
<b>BEGINNING CASH - PER BOOKS</b>					
<b>RECEIPTS</b>					
<b>TRANSFERS BETWEEN ACCOUNTS</b>					
<b>(WITHDRAWAL)CONTRIBUTION- BY INDIVIDUAL DEBTOR MFR-2</b>					
<b>CHECKS/OTHER DISBURSEMENTS</b>					
<b>ENDING CASH - PER BOOKS</b>					

**MOR-8**

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**PAYMENTS TO INSIDERS AND PROFESSIONALS**

Of the total disbursements shown for the month, list the amount paid to insiders (as defined in Section 101(31)(A)-(F) of the U. S. Bankruptcy Code) and the professionals. Also, for insiders identify the type of compensation paid (e.g., salary, commission, bonus, etc.) (Attach additional pages as necessary.)

INSIDERS: NAME/POSITION/COMP TYPE	MONTH	MONTH	MONTH	MONTH	MONTH	MONTH
1.						
2.						
3.						
4.						
5.						
6.						
TOTAL INSIDERS (MOR-1)						

PROFESSIONALS NAME/ORDER DATE	MONTH	MONTH	MONTH	MONTH	MONTH	MONTH
1.						
2.						
3.						
4.						
5.						
6.						
TOTAL PROFESSIONALS (MOR-1)						

**MOR-9**

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This FORM is for **INDIVIDUALS ONLY**Petition Date: **07/06/107**CASE NAME: **JOHN H. HAMILTON, SR.**CASE NUMBER: **10-35770-H4-11**

<b>CASH RECEIPTS AND DISBURSEMENTS</b>	<b>SCHEDULE I &amp; J</b>	<b>09/16/10 – 10/26/10</b>	<b>QUARTER 03/31/08</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>
<b>1. CASH - BEGINNING OF MONTH</b>		<b>0.00</b>					
<b>RECEIPTS</b>		<b>0.00</b>					
<b>2. Wages, Salary, Commissions (net)</b>		<b>0.00</b>					
<b>3. Rents, Royalties, Dividends, Interest</b>		<b>0.00</b>					
<b>4. Social Security, Pension, etc.</b>		<b>0.00</b>					
<b>5. Other (attach list)</b>		<b>0.00</b>					
<b>TOTAL RECEIPTS</b>		<b>0.00</b>					
<b>Draw from (Contribution to) Operation of Business MOR-7</b>		<b>0.00</b>					
<b>DISBURSEMENTS</b>		<b>0.00</b>					
<b>6. Rent or Home Mortgage Payment</b>		<b>0.00</b>					
<b>7. Utilities (electric/gas, water, telephone)</b>		<b>0.00</b>					
<b>8. Home Maintenance (repairs and upkeep)</b>		<b>0.00</b>					
<b>9. Food, Clothing, Laundry, and Dry Cleaning</b>		<b>0.00</b>					
<b>10. Medical and Dental</b>		<b>0.00</b>					
<b>11. Transportation (not including car payment)</b>		<b>0.00</b>					
<b>12. Recreations, Clubs, and Entertainment</b>		<b>0.00</b>					
<b>13. Insurance (not included in wages or home mortgage)</b>		<b>0.00</b>					
<b>14. Taxes (not included in wages or home mortgage)</b>		<b>0.00</b>					
<b>15. Auto Payment</b>		<b>0.00</b>					
<b>16. Credit Cards</b>		<b>0.00</b>					
<b>17. Other (attach list) MORTGAGE PAYMENTS</b>		<b>0.00</b>					
<b>SUB-TOTAL DISBURSEMENTS (for Individual)</b>		<b>0.00</b>					
<b>18. PROFESSIONAL FEES</b>		<b>0.00</b>					
<b>19. U.S. TRUSTEE FEES</b>		<b>0.00</b>					
<b>TOTAL DISBURSEMENTS</b>		<b>0.00</b>					
<b>20. NET CASH FLOW</b>		<b>0.00</b>					
<b>21. CASH - END OF MONTH</b>		<b>0.00</b>					

**MFR-2**

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<b>POST-PETITION LIABILITIES</b>	<b>09/16/10 – 10/26/10</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>
<b>SECURED:</b>						
(attach list)						
<b>TOTAL SECURED</b>						
<b>UNSECURED:</b>						
<b>ACCURED PROFESSIONAL FEES</b>						
<b>ACCURED PROFESSIONAL EXPENSES</b>						
(attach list)						
<b>TOTAL UNSECURED</b>						
<b>TAXES:</b>						
(attach list)						
<b>TOTAL TAXES</b>						
<b>TOTAL POST-PETITION LIABILITIES (for Individual)</b>						